



In the Superior Court of the State of California
In and for the County of Kings

GUARDIANSHIP TERMINATION QUESTIONNAIRE

(local form)

FOR COURT USE ONLY
(RECEIVED ON):

Case Number:

Next Court Date:

Instructions

In order to begin the investigation ordered by the Court, you must complete this questionnaire and return it to:

Kings County Superior Court
449 "C" Street
Lemoore, CA 93245
Attention: Court Investigator

PETITIONER'S NAME

Name:

Your address (Street, City, State and ZIP):

Home Telephone: ()

Cell: ()

Your relationship to the child(ren):

CURRENT GUARDIAN INFORMATION:

Name of Current Guardian:

Telephone number: ()

Address of Guardian (Street, City, State and ZIP):

NATURAL PARENT INFORMATION:

Name of Natural Father:

Telephone number: ()

Address (Street, City, State and ZIP):

Name of Natural Mother:

Telephone number: ()

Address (Street, City, State and ZIP):

CHILDREN UNDER GUARDIANSHIP:

Name:

Date of Birth:

QUESTIONS:

1.) Is anyone opposed to your request to terminate the guardianship? no yes
If yes, who?

2.) Why should the court consider you a more appropriate parent than the guardian(s) at this time? What has changed?

3.) How frequently have you visited with the children in the last 6 months?



Attach copies of any completion certificates (parenting class, drug treatment program, etc.), drug test results, letters from therapists, parole or probation officers, etc.

(If you need more space to answer any questions on this form, attach an 8 ½ -by-11-inch sheet of paper and write the question before your answer.)

Number of pages attached: _____